Accountable Care Organization (ACO) Performance Information on Physician Compare Performance Year 2017

Overview

The Medicare Access and CHIP Re-authorization Act (MACRA) of 2015 amends section 1848(q)(9)(A)(ii) of the Social Security Act (the Act) to make available on the Physician Compare website names of eligible clinicians in Advanced Alternative Payment Models (APMs) and, to the extent feasible, the names and performance of Advanced APMs. In the CY 2017 Quality Payment Program Final Rule, the Centers for Medicare & Medicaid Services finalized linking eligible clinicians and groups to their Alternative Payment Model's data, as relevant and possible, through Physician Compare (81 FR 77398).

As part of fulfilling this mandate, Physician Compare will publicly report 2017 Quality Payment Program performance information for Next Generation and Medicare Shared Savings Program Accountable Care Organizations (ACOs). This document includes the plain language measure titles and descriptions for the ACO performance information that will be publicly reported on Physician Compare in early 2019. Plain language measure titles and descriptions are used on Physician Compare profile pages to allow patients and caregivers to more easily understand the information.

For questions about the Physician Compare and public reporting, visit the <u>Physician Compare Initiative page</u> or contact us at <u>PhysicianCompare@Westat.com</u>.

ACO Quality Measures

Physician Compare will publicly report eight quality measures on ACO profile pages. These measures will be reported as percent performance scores.

Measure #	Technical Measure Title	Plain Language Measure Title	Plain Language Description
ACO-13	Falls: Screening for Future Fall Risk	Screening older patients' risk of falling.	A higher score is better because it means clinicians in this ACO checked more older patients for their risk of falling.
			Older patients can have a higher risk of falling and seriously injuring themselves. Clinicians can check patients' vision, muscle strength, and balance to determine if they are at risk of falling. If patients know they have a high risk of falling, they can take preventive steps to avoid future falls.
			To give this ACO a score, Medicare looked at the percentage of this group's older patients who were checked for risk of falling.



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Measure #	Technical Measure Title	Plain Language Measure Title	Plain Language Description
ACO-14	Preventive Care and Screening: Influenza Immunization	Getting a flu shot during flu season.	A higher score is better because it means more of this ACO's patients got a flu shot during flu season (October 1 to March 31) when appropriate.
			Getting a flu shot during flu season can help prevent the flu and the problems the flu causes.
			To give this ACO a score, Medicare looked at the percentage of this ACO's patients who could get the flu shot and either got one from a clinician in this ACO or from someone else during flu season.
ACO-15	Pneumonia Vaccination Status for Older Adults	Making sure older adults have gotten a pneumonia vaccine.	A higher score is better because it means more of this ACO's older patients got a pneumonia vaccine when appropriate.
			Pneumonia is a common cause of illness and death in older adults and people with certain health conditions. A pneumonia vaccine helps prevent pneumonia and problems pneumonia causes.
			To give this ACO a score, Medicare looked at the percentage of this ACO's patients who had ever gotten a pneumonia vaccine.
ACO-16	Preventive Care and Screening: Body Mass Index Screening and Follow-Up	Screening for an unhealthy body weight and developing a follow-up plan.	A higher score is better because it means clinicians in this ACO checked more patients' weight and created a follow- up plan if their weight was not in the normal range for their body type and height.
			When patients have a higher or lower than normal weight for their body type and height, they are at risk for certain health conditions such as heart disease, diabetes, or malnourishment.
			To give this ACO a score, Medicare looked at the percentage of this ACO's patients who had their weight checked at least once in the last six months. And, if the patient's weight was higher or lower than normal for his or her body type and height, had a follow-up plan documented.
ACO-17	Preventive Care and Screening: Tobacco Use: Screening and	Screening for tobacco use and providing help quitting when needed.	A higher score is better because it means clinicians in this ACO provided counseling to more patients who used tobacco and encouraged them to quit.
	Cessation Intervention		Quitting tobacco lowers a patient's chance of getting heart and lung diseases.
			To give this ACO a score, Medicare looked at the percentage of this ACO's patients who were asked if they used tobacco at least once in the last two years. If patients were using tobacco, the clinician spoke with them about ways to help them quit using tobacco.

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Measure #	Technical Measure Title	Plain Language Measure Title	Plain Language Description
ACO-18	Preventive Care and Screening: Screening for Clinical Depression and Follow-up Plan	Screening for depression and developing a follow-up plan.	A higher score is better because it means clinicians in this ACO screened more patients for depression and created a follow-up plan for patients with depression.
			Managing depression can lead to better coping and outcomes for patients.
			To give this ACO a score, Medicare looked at the percentage of this ACO's patients who were checked for depression and, if they have depression, received a follow-up plan.
ACO-19	Colorectal Cancer Screening	Screening for colorectal (colon or rectum) cancer.	A higher score is better because it means clinicians in this ACO screened more older patients for colorectal cancer.
			All patients ages 50 and older should be checked for colorectal cancer.
			To give this ACO a score, Medicare looked at the percentage of this ACO's patients who were appropriately screened for colorectal cancer using one of three tests (fecal occult blood test, flexible sigmoidoscopy, or colonoscopy).
ACO-41	Diabetes: Eye Exam	Eye exam for patients with diabetes.	A higher score is better because it means clinicians in this ACO gave an eye exam to more patients with diabetes.
			Diabetes is characterized by high blood sugar levels. Untreated diabetes can cause many problems, including eye damage, vision loss, and blindness. Retinal or dilated eye exams are recommended yearly for patients with both type 1 and type 2 diabetes.
			To give this ACO a score, Medicare looked at the percentage of this group's patients with diabetes who received a retinal or dilated eye exam.

CAHPS for ACO Measures

Physician Compare will publicly report five CAHPS for ACO measures on ACO profile pages. These measures will be reported as percent performance scores. The percent performance scores are a calculation of the mean across all of the response categories for each measure¹.

Measure #	Technical Measure Title	Plain Language Measure Title	Plain Language Description
ACO-1	CAHPS: Getting Timely care, Appointments, and Information	Getting timely care, appointments, and information.	A higher score is better because it means that more patients got care, appointments, and information when they needed it.
			Getting care, appointments, and information when you need it is an important part of having access to health care that you deserve.
			To give this ACO a score, Medicare looked at the percentage of patients that said they got timely care including: • Getting an urgent care appointment as soon as
			 needed. Getting answers to medical questions on the same day when calling during regular office hours. Seeing a clinician within 15 minutes of the scheduled appointment time.
ACO-2	CAHPS: How Well Your Providers Communicate	How well clinicians communicate.	A higher score is better because it means that more patients found it easier to communicate with their clinicians.
			An important part of high quality health care is having a clinician listen to you and talk to you about your health in a way that is easy for you to understand.
			 To give this ACO a score, Medicare looked at the percentage of patients that said clinicians communicated well including: Explaining things in a way that was easy to understand. Listening carefully. Showing respect for what patients had to say. Spending enough time with patients.
ACO-3	CAHPS: Patients' Rating	Patients' rating of	A higher score is better because it means that more
	of Provider	clinicians.	patients gave a high rating to their clinician.
			To give this ACO a score, Medicare looked at the percentage of patients who gave their clinicians a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest).

¹ For more information about CAHPS scoring, download the Agency for Healthcare Research and Quality's <u>How to Report</u> <u>Results of the CAHPS Clinician & Group Survey</u> resource.

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Measure #	Technical Measure Title	Plain Language Measure Title	Plain Language Description
ACO-5	CAHPS: Health Promotion and Education	Health promotion and education.	A higher score is better because it means that more patients got information about how to stay healthy.
			A part of high quality care is having your care team give you information about things you can do every day to stay healthy. This includes talking with you about how to prevent illness, keep a healthy diet, exercise, and set goals for your own health.
			To give this ACO a score, Medicare looked at the percentage of patients that said their care team talked with them about what they can do to stay healthy.
ACO-34	CAHPS: Stewardship of Patient Resources	Attention to patient medicine cost.	A higher score is better because it means that clinicians were aware of reasons why patients may not be able to purchase their medicine.
			When your clinicians discuss medicine costs with you, they can be sure that you will be able to afford to follow your care plan.
			To give this ACO a score, Medicare looked at the percentage of patients that said the care team talked with them about the cost of their prescription medicine.